MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT				*		*		*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.			IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/						51							
2		1					52							
3		1					53							
4		2					54							
5		2					55							
6		2					56							
7		2					57							
8		2					58							
9		2					59							
10		2					60							
11	/						61							
12	/						62							
13		2					63							
14	/						64							
15		1					65							
16	/						66							
17		1					67							
18		1					68							
19	/						69							
20	/						70							
21		1					71							
22		1					72							
23		1					73							
24		1					74							
25		1					75							
26		1					76							
27		1					77							
28		1					78							
29		1					79							
30		2					80							
31		2					81							
32		2					82							
33		2					83							
34		2					84							
35		2					85							
36		1					86							
37		1					87							
38	/						88							
39	/						89							
40		2					90							
41							91							
42							92							
43							93							
44							94							
45							95							
46							96							
47							97							
48							98							
49							99							
50							100							
TOTAL IND.	7						TOTAL IND.							
TOTAL DEP.	48						TOTAL DEP.							
TOTAL CLAIMS	55						TOTAL CLAIMS							

PTO-1360 (3-78)

*MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS